

APPLICATION FOR ACCOUNT DETAILS ADDITION/MODIFICATION/DELETION

CDSL DP ID: 48600

Trading Code: _____ DP ID

1	2	0	4	8	6	0	0
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Client ID

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Application No: _____

Date: / /

Please fill all the details in Block Letters in English. Please mark (✓) on the appropriate column.

First/Sole Holder Name	PAN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Second Holder Name	PAN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Third Holder Name	PAN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trading a/c Holder Name		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To, AFN Langrana Share & Stock Brokers Pvt. Ltd. 106, Veena Chamber, 21 Dalal Street, Fort, Mumbai, 400 001.

Dear Sir/Madam, I/We request you to make the following Additions/Modification/Deletions to my/our Trading and Demat (DP) account in your records.

I/We request to carry out the change of address/signature in the demat account. I/We request to carry out the change of address/signature in the KRA and demat account

Address modification: Correspondence Permanent (Permanent address modification done only in DP) Registered Address (only for non-individual)

Existing Details	New Details
Address: _____	Address: _____
City/town/village : _____ State: _____	City/town/village : _____ State: _____
Country: _____ Pincode: _____	Country: _____ Pincode: _____

*Documents Required: Ration Card Passport Voter ID Driving License Bank Passbook/ Statement (not older than 4 months)
 Electricity/ Telephone Bill (not older than 3 months) Leave & Licence Agreement/ Agreement for Sale Govt. proof/others (please specify) _____

Bank & Dividend Details : Addition Modification Deletion

Existing Details	New Details																				
Bank Name : _____	Bank Name : _____																				
Branch/Address : _____	Branch/Address : _____																				
A/c No. : _____ A/c Type: _____	A/c No. : _____ A/c Type: _____																				
IFSC code : <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>											IFSC code : <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>										
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*Documents Required: Bank/Passbook statement (not older than 4 months) Cancelled Cheque Leaf with name printed Letter from bank

Contact Details: Addition Modification Deletion First / Sole Holder Second Holder Third Holder

Existing Details	New Details
Tel No. ☎ : _____ Mob 📱 : _____	Tel No. ☎ : _____ *Mob 📱 : _____
Email ID ✉ : _____	*Email ID ✉ : _____

Please specify the new mobile no. registered in the name of _____

I/ We affirm, confirm agree that I/We have read and understood the Terms and Condition for usage of SMS alerts facility Governed by CDSL.

* change of email id shall automatically change email id for ECN and other confirmation.

Request to update POA Annual Income Segment Occupation Status Others (Please specify) _____

	Existing Details	New Details
POA	<input type="checkbox"/> Enable <input type="checkbox"/> Disable	<input type="checkbox"/> Enable <input type="checkbox"/> Disable
Annual Income	<input type="checkbox"/> upto 1,00,000 <input type="checkbox"/> 1,00,001 to 5,00,000 <input type="checkbox"/> 5,00,001 to 10,00,000 <input type="checkbox"/> 10,00,001 to 25,00,000 <input type="checkbox"/> more than 25,00,000 <input type="checkbox"/> 25,00,001 to 1,00,00,000 <input type="checkbox"/> more than 1,00,00,000	<input type="checkbox"/> upto 1,00,000 <input type="checkbox"/> 1,00,001 to 5,00,000 <input type="checkbox"/> 5,00,001 to 10,00,000 <input type="checkbox"/> 10,00,001 to 25,00,000 <input type="checkbox"/> more than 25,00,000 <input type="checkbox"/> 25,00,001 to 1,00,00,000 <input type="checkbox"/> more than 1,00,00,000
Occupation	<input type="checkbox"/> Business <input type="checkbox"/> Housewife <input type="checkbox"/> Professional <input type="checkbox"/> Retired <input type="checkbox"/> Student <input type="checkbox"/> Farmer <input type="checkbox"/> Private sector <input type="checkbox"/> Public sector <input type="checkbox"/> Govt. service <input type="checkbox"/> Others _____ (Please specify)	<input type="checkbox"/> Business <input type="checkbox"/> Housewife <input type="checkbox"/> Professional <input type="checkbox"/> Retired <input type="checkbox"/> Student <input type="checkbox"/> Farmer <input type="checkbox"/> Private sector <input type="checkbox"/> Public sector <input type="checkbox"/> Govt. service <input type="checkbox"/> Others _____ (Please specify)
Status	<input type="checkbox"/> Private Ltd. Co. <input type="checkbox"/> Public Ltd. Co. <input type="checkbox"/> Body Corporate <input type="checkbox"/> Partnership <input type="checkbox"/> Trust / Charities / NGOs <input type="checkbox"/> FI <input type="checkbox"/> FII <input type="checkbox"/> HUF <input type="checkbox"/> AOP <input type="checkbox"/> bank <input type="checkbox"/> Govt. Body <input type="checkbox"/> NGO <input type="checkbox"/> Defence establishment <input type="checkbox"/> Body of individuals <input type="checkbox"/> Society <input type="checkbox"/> LLP <input type="checkbox"/> Others _____ (Please specify)	<input type="checkbox"/> Private Ltd. Co. <input type="checkbox"/> Public Ltd. Co. <input type="checkbox"/> Body Corporate <input type="checkbox"/> Partnership <input type="checkbox"/> Trust / Charities / NGOs <input type="checkbox"/> FI <input type="checkbox"/> FII <input type="checkbox"/> HUF <input type="checkbox"/> AOP <input type="checkbox"/> bank <input type="checkbox"/> Govt. Body <input type="checkbox"/> NGO <input type="checkbox"/> Defence establishment <input type="checkbox"/> Body of individuals <input type="checkbox"/> Society <input type="checkbox"/> LLP <input type="checkbox"/> Others _____ (Please specify)
Others		
Net-worth as on date _____ Rs. _____	(Net worth Should be not be older than 1 Year)	

To activate in F&O segment, please submit your income proof (not older than 6 months)

*Note: Proof required to be self attested from all the holders.

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein immediately in writing. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/ We may be held liable for it.

First / Sole Holder

Second Holder

Third Holder

Acknowledgment Receipt

Trading Code: _____ DP ID

1	2	0	4	8	6	0	0
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Client ID

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Date: _____

We hereby acknowledge the receipt of your instruction for modification of the following account subject to verification:

	First/Sole Holder	Second Holder	Third Holder
Name			

Modification request for (specify reason): _____

For AFN Langrana Share & Stock Brokers Pvt. Ltd.

(DP / KYC Seal & Signature)

*Please note that the said Modification Form and overleaf instructions should be printed on the same page (back to back).

INSTRUCTIONS/CHECK LIST FOR FILLING MODIFICATION FORM

1. Self attested copy of PAN card is mandatory for all clients in all type of change request.
2. Copies of all the documents submitted by the applicant should be self – attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mention list.
3. If any proof of address is in other language, then translation into English is required.
4. Name & address of the applicant mentioned on the Modification form, should match with documentary proof submitted.
5. Documents having an expiry date should be valid on the date of submission.
6. Account modification form duly signed by all the account holders.
7. DP should obtain proof of address of the first holder.
8. The following Government Proof is consider as a address proof while giving for modifying address details:
 - a) Central/State Government and its Departments
 - b) Statutory / Regulatory Authorities
 - c) Public Sector Undertakings
 - d) Scheduled Commercial Banks
 - e) Public Financial Institutions
 - f) Colleges affiliated to universities
 - g) Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their members.
9. The following modification details mentioned in Other Details option:
 - (I) New Marital
 - (ii) New Nationality
 - (iii) New Status (Resident Individual/Non Resident)
 - (iv) Net-worth
 - (v) Name, PAN, DIN / UID, residential address and photographs of Promoters / Partners / Karta / Trustees / whole time directors (Please use the annexure to fill in the details)